

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*Clerk of Court
Joseph C. O'Mahoney
Fed. Center
2120 Capitol Ave.
2nd Flr
Cheyenne, WY 82001-*

2. Article Number

(Transfer from service label)

*3658***COMPLETE THIS SECTION ON DELIVERY**

A. Signature

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

*6/26*D. Is delivery address different from Item 1? YesIf YES, enter delivery address below: No*Doc 438-MEF
entire file*

3. Service Type

Certified Mail

 Express Mail

Registered

 Return Receipt for Merchandise

Insured Mail

 C.O.D.4. Restricted Delivery? (Extra Fee) Yes*7005 1820 0002 3461 084*

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540